



Division of Medical Services
Program Development & Quality Assurance

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OFFICIAL NOTICE

TO: Health Care Provider – All Providers

DATE: October 1, 2010

SUBJECT: 2011 ICD-9-CM Diagnosis Codes

Effective for claims with dates of service on or after October 1, 2010, the Arkansas Medicaid Program will implement the revisions included in the 2011 International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM). Providers must enter the updated diagnosis code, if applicable, on claims with dates of service on or after October 1, 2010.

If you have questions regarding this notice, please contact the HP Enterprise Services Provider Assistance Center at In-State WATS 1-800-457-4454, or locally and Out-of-State at (501) 376-2211.

If you need this material in an alternative format, such as large print, please contact our Americans with Disabilities Act Coordinator at 501-682-0593 (Local); 1-800-482-5850, extension 2-0593 (Toll-Free) or to obtain access to these numbers through voice relay, 1-800-877-8973 (TTY Hearing Impaired).

Arkansas Medicaid provider manuals, official notices and remittance advice (RA) messages are available for downloading from the Arkansas Medicaid website: www.medicaid.state.ar.us.

Thank you for your participation in the Arkansas Medicaid Program.

Eugene I. Gessow, Director